

10033474

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	39	Minus	36	= 3
Independent	5	Minus	4	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

	(Column 1)		(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

TYPE <input type="checkbox"/>		OR SMALL ENTITY	
RATE	FEE	RATE	FEE
BASIC FEE		OR	
XS 9=		OR	XS18=
X42=		OR	X84=
+140=		OR	+280=
TOTAL		OR	TOTAL

SMALL ENTITY		OR SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR	XS18= 54.00
X42=		OR	86 86.00
+140=		OR	+280=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE 140.00

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR	XS18=
X42=		OR	X84=
+140=		OR	+280=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR	XS18=
X42=		OR	X84=
+140=		OR	+280=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

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